

**LAHIVE
&
COCKFIELD**
L L P

COUNSELLORS AT LAW
28 STATE STREET
BOSTON, MASSACHUSETTS 02109-1784
TELEPHONE (617) 227-7400
FAX (617) 742-4214
lc@lahive.com

JOHN A. LAHIVE, JR. (1928-1997)
THOMAS V. SMURZYNSKI
RALPH A. LOREN
GIULIO A. DECONTI, JR.
ANN LAMPORT HAMMITTE
ELIZABETH A. HANLEY
AMY BAKER MANDRACOURAS
ANTHONY A. LAURETANO
KEVIN J. CANNING
JANE E. REMILLARD
DOANN FORAN SMITH
PETER C. LAURO
JEANNE M. DIGIORGIO
DEBRA J. MILAGUINCIC, Ph.D.
DAVID J. RUNNERS
DAVID R. BURNS
JOHN S. CURRAN
SEAN D. DETWEILER
CYNTHIA L. KANIK, Ph.D.

MEGAN E. WILLIAMS, Ph.D.
RICHARD N. AND
MICHAEL PHILLIPPS
LISA M. DAROCCO

SENIOR COUNSEL
JAMES E. COCKFIELD

OF COUNSEL
JEREMIAH LYNCH
WILLIAM A. SCOFIELD, JR.

PATENT AGENTS
PETER S. STECHER
THEODORE R. WEST
SHATNEY RUFF, Ph.D.
NATHANWAY P. RUSSELL
DANIEL B. KO

TECHNICAL SPECIALISTS
MARIA LACOTRIPE ZACHARAKIS, Ph.D.
CYNTHIA M. SORDOS
PETER W. DINI, Ph.D.
EUNHOON LEE
JENNIFER K. ROSENFELD
ALLAN TAMESHITI, Ph.D.
CATHERINE E. McPHERSON
ERIC F. WAGNER, Ph.D.
SHAHID HABAN, Ph.D.
JACOB G. WEINTRAUB
JONATHAN M. SPARKS, Ph.D.
CRISTIN E. HOWLEY, Ph.D.

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To: Examiner Mojdeh Bahar
Company: U.S. Patent and Trademark Office
Location: Washington, D. C.
Phone: 703-305-1007
Fax: 703-308-4556

From: Elizabeth A. Hanley, Esq.
Phone: (617) 227-7400
Fax: (617) 742-4214
Case No.: U.S.S.N.: 09/249,350
Atty. Docket No. WTZ-004

Date: September 27, 2001

Sent By:

**Pages including this
cover page: 10**

Message:

PLEASE DELIVER TO EXAMINER BAHAR IMMEDIATELY.
THANK YOU.

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Case Docket No. WTZ-004In re the application of William G. Tatton *et al.*

Serial No. 09/249,350

Filed: February 11, 1999

For: USE OF DEPRENYL COMPOUNDS TO TREAT VIRAL INFECTIONS AND REDUCE
TISSUE DAMAGE ASSOCIATED THEREWITHCOMMISSIONER FOR PATENTS
Washington, D.C. 20231

Sir:

Transmitted herewith for filing in connection with the above-identified application are the following:

- ☒ Amendment and Response
☒ Request for Three-Month Extension of Time
☐

The fee has been calculated as shown below:

(Col 1)		(Col 2)	(Col 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	14	MINUS 23	= 0
INDEP	1	MINUS 5	= 0
<input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			

SMALL ENTITY	
RATE	ADDIT. FEE
▲ 9 =	\$0.00
▲ 40 =	\$0.00
+ 135 =	\$0.00
TOTAL ADDIT. FEE	\$0.00

OTHER THAN A SMALL ENTITY	
RATE	ADDIT. FEE
▲ 18 =	\$0.00
▲ 80 =	\$0.00
+ 270 =	\$0.00
TOTAL	\$0.00

- If the entry in Col 1 is less than the entry in Col 2, write "0" in Col 3
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

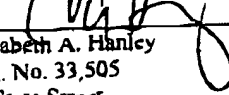
- ☐ A check in the amount of _____ is enclosed for presentation of extra claims.
☐ A check in the amount of _____ is enclosed for .
☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 12-0080. A duplicate copy of this sheet is enclosed.
☒ \$445.00 for three-month extension fee.
☐ Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
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☒ Please charge any additional fees or credit any overpayments associated with this communication to our Deposit Account No. 12-0080. The undersigned requests any extensions of time necessary to respond. A duplicate copy of this sheet is enclosed.

I hereby certify that this transmittal letter and the papers referred to as being enclosed therein are being facsimile transmitted to the Commissioner for Patents, Washington, DC 20231 on:

September 27, 2001
 Date

Elizabeth A. Hanley, Reg. No. 33,505

LAHIVE & COCKFIELD, LLP
 Attorneys at Law

By 
 Elizabeth A. Hanley
 Reg. No. 33,505
 28 State Street
 Boston, MA 02109
 (617) 227-7400
 Telecopier (617) 742-4214

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